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(Depositor's name) (Signature (Date

	T	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLICATION NO.	FILING DATE	Robert Harold Bateman	DEH009	2640
09/995,662	11/29/2001	ROBERT HAIDIG BARRING		

TITLE OF INVENTION: MASS SPECTROMETERS AND METHODS OF MASS SPECTROMETRY

	SMALL ENTITY	ISSUE FEE	3	PUBLICATION FEE	TOTAL FEE(S)	DUE	DATE DUE
APPLN. TYPE		\$1330		\$300	\$1630		08/25/2004
nonprovisional	NO			CLASS-SUBCLASS	٦		
EXA	MINER	ART UNIT	ſ 		J		
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ange of corresponden	ce address or indication of "	Fee Address" (37		inting on the patent front page f up to 3 registered patent	attorneys or 1_3	<u>Diederil</u>	s & White
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. Durs Address" indication (or "Fee Address" Indication form atto		firm (hav	agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
		attorneys					

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) (A) NAME OF ASSIGNEE

(A) NAME OF ASSIGNED					
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4a. The following fee(s) are enclosed:	XXA check in the amou	unt of the fee(s) is enclo	osed.		
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ES PATENT AND TRADEMARK OFFICE

In re Application of	Bateman et al.)) Art Unit:	2881	
Serial Number	09/995,662)) Examiner:)	C. Kalivoda	
Filed	November 29, 200	1) Atty Docket:	DEH009	
For: Mass Spectr	ometers and Metho	ds of Mass Spectrometry		
COMMISSIONER BO Box 1450 Alexandria, VA 2				
Sir:		•		
The below identified con	nmunication(s) or docum	ent(s) is(are) submitted in the above	e application or proceeding:	
☐ Advance Order for P☐ ☐ Priority Document ☐ Formal Drawings (☐ ☐ Small Entity Declaration	_ sheets)	 ☑ Issue Fee Transmittal ☑ Check in the Amount of _\$1,630.00 ☐ Change of Correspondence Address ☐ Fee Address Indication 		
Please debit or cred	it Deposit Account Num duplicate copy of this she	aber 04-1075 for any deficiency of the Depo	r surplus in connection with this osit Account Branch.	

Everett G. Diederiks, Jr.
Attorney for Applicant
Registration Number: 33,323

Date: August 25, 2004